PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09886992

CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			1				I	RATE	FEE) 	RATE	FEE
FOR			NUMBER F	ILED	NUMBI	R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		• 0			X\$ 9=		OR	X\$18=	1
INDEPENDENT CLAIMS			\ minus 3 =		* <i>O</i>			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	.]	OR	+270=	
* If the difference in column 1 is less that			less than ze	zero, enter "0" in column 2			ł	TOTAL		OR	TOTAL	710:
CLAIMS AS AMENDED - PART					T II		,				OTHER	
	<u>.</u> .	(Column 1)	ſ	(Colu		(Column 3)	_	SMALL E	ENTITY	QR	SMÄLLI	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI: TIONAL FEE
	Total		Minus	**	-			X\$ 9=-		OR	X\$18≐	
	Independent	AUTATION OF M	Minus	***	T OL A114	-	┨┃	X40=		OR	X80=	-
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM			+135=		OR	+270=	
					2			TOTAL			TOTAL	
		(Caluman d)		(Calu	····· 0\	(Calumn 2)		ADDIT. FEE		ָיייסן	ADDIT. FEE	
	. <u>.</u>	(Column 1)	1		imn 2) HEST	(Column 3)	5 1	•	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	·	PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	ا إ	X\$ 9=		OR	X\$18=	ا میں مند مند
	Independent	*	Minus	***		=	J I	X40=		OR	X80=	Fred.
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	I CLAIM		J	+135=		OR	+270=	,
	·						•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3))_					7,-
AMENDMENT C	·	CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	./	Minus	** (26	= 0] [X\$ 9=	· - ()	OR	X\$18=	0
AME	Independent	1:/	Minus	***	9	<u> </u>	┧┃	X40=		OR	X80=	0
L	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN	I LELAIM		┛╽	+135=			+270=	9
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												0